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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P94000046724 (8)

ALSPACH, INC.

Principal Place of Business

Mailing Address

FILED Mar 06 1997 8:00am Secretary of State



City & State City & State City & State Country Country Country Country Country Palm Bch 28 334 9. Name and Address of Current Registered Age ALSPACH, DEBBIE 4308 POINSETTIA AVE. W. PALM BCH. FL 33407 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, office or registered agent or both, in the State of Florida. Such a agent 1 and farmfar with, and accept the obligations of, Section SIGNATURE Signature typical or pointed have of teger read the if applicable 12. OFFICERS AND DIRECTORS	pt #, etc. State Palm HOT Jent Florida Statute change was a 607.0505, Florida	Street / Ball Name 81 Name 82 Street / Ball City 83 Land City 84 City 85 the above-named athorized by the corp	5. Certificate of Status Desired	i For objective onal and Be es
21 410 49th Street 26 410 Suite, Apt suite,	pt #, etc. State Palm HOT Jent Florida Statute change was a 607.0505, Florida	Perch, Country Country Country Registered Agent signature	5. Certificate of Status Desired \$8.75 Addition Fee Require 6. Election Campaign Financing Trust Fund Contribution Added to Fee 8. This corporation has liability for intangible tax upder s. 199. Florida Statutes Yes No 10. Name and Address of New Registered Agent A Spach Deblee Address (FO. Box Number is Not Acceptable) Party Back FL corporation submits this statement for the purpose of changing its registered when relinstating) DATE	onal od Be es .032,
Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Country Zip Country Zip 23 West Palm Be ach, FL 28 West Zip 24 33407 25 Ralm Beh 29 339 9. Name and Address of Current Registered Age ALSPACH, DEBBIE 4308 POINSETTIA AVE. W. PALM Beh. FL 33407 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, office or registered agent or both, in the State of Florida. Such office or registered agent or both, in the State of Florida. Such office or registered agent or both, and accept the obligations of, Section SIGNATURE Signature typed or pented have of teger creat agent and the if applicable 12. OFFICERS AND DIRECTORS	Florida Statute change was a 607.0505, Florida	Perch, Country Country Country Registered Agent signature	5. Certificate of Status Desired	Be es .032,
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9. Name and Address of Current Registered Age ALSPACH, DEBBIE 4308 POINSETTIA AVE. W. PALM BCH. FL 33407 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, office or registered agent or both, in the State of Florida. Such agent 1 am farm far with, and accept the obligations of, Section SIGNATURE Signature typical or pointed name of registered agent and the if applicable 12. OFFICERS AND DIRECTORS	Florida Statute change was a 607.0505, Flor (NOIE	81 Name 82 Street A 83 LL 84 City s, the above-named atthorized by the corporate Statutes. Registered Agent signature	Florida Statutes Yes No 10. Name and Address of New Registered Agent A Spach, Debble Address (Fo. Box Number is Not Acceptable) Corporation submits this statement for the purpose of changing its regionation's board of directors. I hereby accept the appointment as registered when reinstating) DATE	67
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12. OFFICERS AND DIRECTORS				
TITLE P		1 12		
	Lociere	···•	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	
NAME ALSPAUH, AKTHUK	DELETE	1.1 TITLE	P (A (C	Addition
		1.2 NAME	Alspach, Acthur	
STHEET ADDRESS 4308 POINSETTIA AVE.		1.3 STREET ADDRESS	410 4940 Smeet	
CHY-ST-ZIP W. PALM BCH. FL 33407		1.4 CITY-SI-ZIP	W. Halm Beh FL 3340+	
	DELETE	2.1 TITLE	SV had change	Addition
NAME ALSPACH, DEBBIE		2.2 NAME	Alspach, Debbic	
STHEET ADDRESS 4308 PAINSETTIA AVE.		2.3 STREET ADDRESS	41049th street	ا سی
CITY STEZIE W. PALM BCH. FL 33409		2. 4 CITY - ST - ZIP	West Palm Beach, TL 3340)+
	DELFTE	3.1 TITLE	Change	Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
C-FY - ST - 74P	1 or ere	3.4. CITY-ST-ZIP		
· ·	DELETE	4.1 THILE	Change	Addition
NAME		4.2 NAME		
STREEL ADDRESS		4.3 STREET ADDRESS		
City - St - ZiP	I DELET	4.4 CITY-ST-ZIP		
	DELETE	5.1 TITLE	Change	Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY - ST - 70°	T or or or	5 4 CITY- ST- ZIP		
	DELETE	6 1 TITL€	Change	Addition
NAME		6 2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
City St-Zin 1 14. I go hereby certly that the information supplied with this filing de		6 4 CITY-ST-ZIP		

To neerby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the exemption or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 if pharged, or any phartical with arraddress.

SIGNATURE

3/2/97 561842747